2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000004990

FILED Apr 25, 2008 Secretary of State

Entity Name: SCHOONER COVE CONDOMINIUM ASSOCIATION OF TAMPA, INC,

Current Principal Place of Business: New Principal Place of Business:

14055 RIVEREDGE DRIVE STE 200 5844 OLD PASCO ROAD

TAMPA, FL 33637 SUITE 100

WESLEY CHAPEL, FL 33544

Current Mailing Address: New Mailing Address:

14055 RIVEREDGE DRIVE STE 200 5844 OLD PASCO ROAD

TAMPA, FL 33637 SUITE 100

WESLEY CHAPEL, FL 33544

FEI Number: 26-0298843 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CLEMMONS, RUBY RIZZETTA & COMPANY, INC. 14055 RIVEREDGE DRIVE STE 200 5844 OLD PASCO ROAD

TAMPA, FL 33637 SUITE 100

WESLEY CHAPEL, FL 33544 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: WILLIAM J. RIZZETTA 04/25/2008

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

JOYNER, JAMES JOYNER, HUGH Name: Name:

14055 RIVEREDGE DRIVE STE 200 Address: 14055 RIVEREDGE DRIVE STE 200 Address: TAMPA, FL 33637

City-St-Zip: City-St-Zip: TAMPA, FL 33637

Title: () Delete Title: (X) Change () Addition

THOMPSON, LARRY Name: THOMPSON, LARRY Name:

Address: 14055 RIVEREDGE DRIVE STE 200 Address: 14055 RIVEREDGE DRIVE STE 200

City-St-Zip: TAMPA, FL 33637 City-St-Zip: TAMPA, FL 33637

Title: DST () Delete Title: (X) Change () Addition

CLEMMONS, RUDY CLEMMONS, RUDY Name: Name:

14055 RIVEREDGE DRIVE STE 200 14055 RIVEREDGE DRIVE STE 200 Address: Address:

City-St-Zip: TAMPA, FL 33637 City-St-Zip: TAMPA, FL 33637

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HUGH JOYNER Ρ 04/25/2008